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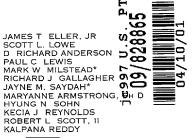
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CALIFORNIA OFFICE Costa Mesa, California

Date: April 10, 2001

Docket No.: 2916-0128P



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BOX PATENT APPLICATION

Assistant Commissioner for Patents Washington, DC 20231

Sir:

For:

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Transmitted herewith for filing is a patent application claiming priority under 35 U.S.C. § 119(e) of Provisional Application No. 60/197,677 filed on April 17, 2000.

Inventor(s): Mark T. CORL

DIFFERENTIATED PSIP TABLE UPDATE INTERVAL TECHNOLOGY

Enclosed are:

\boxtimes	A specification consisting of twelve (12) pages
\boxtimes	Two (2) sheet(s) of formal drawings
\boxtimes	An assignment of the invention
	Certified copy of Priority Document(s)
\boxtimes	Executed Declaration (\square Original \boxtimes Photocopy)
	Applicant claims small entity status under 37 C.F.R. § 1.27.
	Preliminary Amendment
	Information Disclosure Statement, PTO-1449 and reference(s)

	Applicant fee	requests	early	publication		\$300.00	publication	on
П	Non-public	cation Red	mest a	nd Certifica	tic	n under	35 II C C	ج

Non-publication Request and Certification under 35 U.S.C. § 122(b)(2)(B)(i)

Other:

Amend the specification by inserting before the first line the sentence:

--This application claims priority on provisional Application No. 60/197,677 filed on April 17, 2000, the entire contents of which are hereby incorporated by reference.--

The filing fee has been calculated as shown below:

			LARGE ENTITY	SMALL ENTITY	
	BASIC FEE		\$710.00	\$355.00	
	NUMBER FTI.ED	NUMBER EXTRA	RATE FEE	RATE FEE	
TOTAL CLATMS	14- 20 =	0	X 18 = \$0.00	x 9 = \$0.00	
INDEPENDENT CLAIMS	2- 3 =	0	x 80 = \$0.00	x 40 = \$0.00	
MULTIPLE DEPENDENT CLAIMS PRESENTED		Γ	+ \$270.00	+ \$135.00	
		TOTAL	\$710.00	\$0.00	

- \square A check in the amount of \$750.00 to cover the filing fee and recording fee (if applicable) is enclosed.
- Please charge Deposit Account No. 02-2448 in the amount of \$0.00. A triplicate copy of this transmittal form is enclosed.
- □ Please send correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or Customer No. 2292 P.O. Box 747

Falls Church, VA 22040-0747 Telephone: (703) 205-8000

If necessary, the Commissioner is hereby authorized in this, concurrent, and future replies, to charge payment or credit any overpayment to Deposit Account No. 02-2448 for any additional fees required under 37 C.F.R. §§ 1.16 or 1.17; particularly, extension of time fees.

Respectfully submitted,

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TLC/TSA:sld 2916-0128P

Attachments

(Rev. 01/22/01)